

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

Form Approved.
Budget Bureau No. 42-21424

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form 9-131-C for such proposals.)

1. oil ☒ gas ☐
well well other

2. NAME OF OPERATOR

Jack A. Cole

3. ADDRESS OF OPERATOR

P.O. Box 191, Farmington, N.M. 87499

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)

AT SURFACE: 640' FSL, 2005' FWL

AT TOP PROD. INTERVAL: Same

AT TOTAL DEPTH: Same

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

CHANGE ZONES ☐

ABANDON* ☐

(other) Amended Cement Summary

SUBSEQUENT REPORT OF:

RECEIVED

NOV 14 1986

(NOTE: Report results of multiple completion or zone change on Form 9-130.)

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Recalculated top of 1st. stage cement-3583'.

Top of Mesa Verde-3617'.

ACCEPTED FOR RECORD

NOV 18 1986

FARMINGTON RESOURCE AREA

BY EBH

Subsurface Safety Valve: Manu. and Type _____

Set @ _____ Ft.

18. I hereby certify that the foregoing is true and correct.

SIGNED Dwayne Blum TITLE Production Superintendent DATE November 13, 1986

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL IF ANY:

NMOCG

*See instructions on Reverse Side

In the future wire line log verification will be required to verify the top of cement for day and all cement stages which are not circulated past the bottom of the next stage or to surface.